

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL S	ID NO.	DATE
FEE DETERMINATION	UT	671007	9/29/99
O.I.P.E. CLASSIFIER		10/1/99	
FORMALITY REVIEW	WN	671179	10-13-99

1-4-99

INDEX OF CLAIMS

✓ ejected N Non-elected
 = lowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
Final Original	
51	✓
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Claim	Date
Final Original	
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If more than 50 claims or 10 actions
 staple additional sheet here